



Indiana Department of Environmental Management

We Protect Hoosiers and Our Environment.

100 N. Senate Avenue • Indianapolis, IN 46204

(800) 451-6027 • (317) 232-8603 • www.idem.IN.gov

Michael R. Pence
Governor

Carol S. Comer
Commissioner

December 1, 2016

Michelle Puckett, Auditor
Kosciusko County
100 W Center St Rm 220
Warsaw, Indiana 46580

Dear County Auditor:

Re: Geothermal Heating/Cooling Device
Pursuant to IC 6-1.1-12-34
Property Tax Deduction for
Aaron & Kacie Zolman
4387 W 200 S
Warsaw, Indiana 46580
Parcel Number: 43-10-27-100-017.000-
034

The above referenced claim for a property tax deduction, attached State Form 18865 and supplemental attachments, submitted by the above referenced applicant, have been reviewed by this Office in accordance with IC 6-1.1-12-35.5. Please be advised that the heating/cooling system outlined in the claim for exemption (18865) qualifies as a geothermal system as defined in IC 6-1.1-12-34. The total amount of this claim shall be pursuant to IC 6-1.1-12-34(b). This certification does not include a determination as to the total actual or depreciated value of the claimed property.

This certification is for the life of the installed equipment and does not need to be requested on an annual basis. However, when the equipment is no longer in service, the owner of the equipment for which this certification is made must give written confirmation to the assessor of the township or county in which the equipment is installed.

Additionally, this certification does not include a determination as to the timeliness of the claim nor whether the property claimed for exemption is real or personal property.



A State that Works

If you have any questions concerning this matter, you may contact Ms. Donna Palmer at (317) 233-0478.

Sincerely,

A handwritten signature in black ink, appearing to read 'Lance Myers', with a stylized, flowing script.

Lance Myers, Section Chief
Operations Section
Office of Water Quality

Certification/Approval Number: 161125
Aaron & Kacie Zolman



STATEMENT FOR DEDUCTION OF ASSESSED VALUATION

(Attributed to Solar Energy System or Solar, Wind, Geothermal or Hydroelectric Power Device)

State Form 18865 (R9 / 8-12)

Prescribed by the Department of Local Government Finance

FORM SES / WPD

2016 PAY 2017

INSTRUCTIONS: To be filed in person or by mail by the owner of such property with the County Auditor of the county in which the property is located. A person who is no longer eligible for this deduction shall notify the County Auditor of this change. (IC 6-1.1-12-36)

FILING DATES: (1) Real Property: Must be completed and dated by December 31 of the year for which the person wishes to obtain the deduction and filed on or before January 5 of the following calendar year.
(2) Mobile/Manufactured Home assessed under IC 6-1.1-7: Must be completed, dated, and filed during the twelve (12) months before March 31 of the year the deduction is to be effective.
(3) State Distributable Property under IC 6-1.1-8 (solar powered device only): Must be completed and dated by December 31 of the year for which the person wishes to obtain the deduction and filed on or before January 5 of the following calendar year.
(4) Personal Property under IC 6-1.1-3 (solar powered device only): Must be completed and dated by December 31 of the year for which the person wishes to obtain the deduction and filed on or before January 5 of the following calendar year. In addition to filing this form for the deduction, an applicant must also attach a Form 103-SPD to either his personal property tax return or his amended personal property tax return for each year the deduction is desired.
(IC 6-1.1-12-26; 6-1.1-12-26.1; 6-1.1-12-27.1; 6-1.1-12-29; 6-1.1-12-30; 6-1.1-12-33; 6-1.1-12-34; 6-1.1-12-35.5; 6-1.1-12-36)

All claims for a deduction filed on a geothermal or hydroelectric system or device must be accompanied by proof of certification of qualification by the Department of Environmental Management pursuant to 6-1.1-12-35.5.

CERTIFICATION STATEMENT

I (We), Zolman Aaron & Kacie certify that I (we) own or am (are) buying on contract or am (are) leasing the real property from the real property owner the following real property, mobile/manufactured home, state distributable property, or personal property that is subject to assessment and property taxation and for which a:

☐ Solar Energy Heating or Cooling System ☐ Wind Power Device ☒ Geothermal Device ☐ Hydroelectric Device

Solar Power Device*: ☐ Real ☐ Mobile/Manufactured Home ☐ State Distributable ☐ Personal Property

*Applies to a solar power device installed after December 31, 2011.

deduction from assessed valuation is here by claimed in KOSCIUSKO County.

RECEIVED

Date system/device was installed (month, day, year)

Total deduction claimed

\$

NOV 29 2016

AB

PROPERTY DESCRIPTION

Taxing District (city, town, township)

13 Harrison

Township

13 Harrison

Legal description or key number

013-120-002.AAPT NW NE 27-32-55.83A PER DEED

If a deduction was allowed last year, have there been any changes in the property?

☐ Yes ☒ No

Parcel number

013-726004-95

43-10-27-100-017.000-034

Address of owner (number and street, city, state and ZIP code)

4387 W 200 S

Warsaw IN

46580

I (We) hereby certify that the above statement is true, correct and complete.

Signature

[Signature]

Date signed (month, day, year)
11/29/2016

FOR AUDITOR'S USE ONLY

Assessment Date First Effective
2016 pay 2017

1 Total assessed value of real property or mobile/manufactured home including qualifying device/system.

2(a) For wind; geothermal; hydroelectric; real property or mobile/manufactured home with a solar powered device: Enter the assessed valuation without the qualifying device/system.

2(b) For solar energy system only: Out-of-pocket expenditures for components and installation labor.

2(c) For personal property solar power device deduction: Enter amount calculated on Form 103-SPD.

2(d) For state distributable solar power device deduction: Enter assessed value of qualifying equipment.

3 Deduction: Line 1 minus Line 2(a); or enter the actual amount shown on line 2(b), 2(c), or 2(d).

VERIFICATION BY ASSESSING OFFICIAL

Is property recommended for deduction?

☐ Yes ☐ No

Recommended deduction

Comments, if any

Signature of assessing official

Printed name of assessing official

Susan Engelberth

Date signed (month, day, year)

FINAL DETERMINATION OF COUNTY AUDITOR

Deduction determined by County Auditor for March 1, 20____ payable in 20____.

Approved deduction

\$

Signature of county auditor

Michelle L. Puckett

Printed name of county auditor

Michelle L. Puckett

Date signed (month, day, year)

11/29/2016

Description or reasons for change:

Geothermal Property tax deduction

Aaron Zolman

4387 W 200 S

Warsaw IN 46580

574-551-3969

Make- United Technologies Carrier

Model- 50YEV048LCB311

Serial -3511V31882

PALMER, DONNA

From: Zolman, Aaron <aaron.a.zolman@medtronic.com>
Sent: Wednesday, November 30, 2016 2:37 PM
To: PALMER, DONNA
Subject: FW: Geo Tax deduction info
Attachments: form 18865.pdf; Geo unit info.pdf

Importance: High

**** This is an EXTERNAL email. Exercise caution. DO NOT open attachments or click links from unknown senders or unexpected email. ****

Hello Donna,

I have attached my information to process my tax deduction. Please let me know when you will be sending info to county so I can follow up to assure it is added.

Thanks greatly!

Aaron Zolman

Sourcing Engineer | Core Spine Advanced Sourcing

Medtronic

Restorative Therapies Group - RTG

Office +1.574.371.3356

aaron.a.zolman@medtronic.com

medtronic.com | [Facebook](#) | [LinkedIn](#) | [Twitter](#) | [YouTube](#)

**LET'S TAKE HEALTHCARE
FURTHER, TOGETHER**

[CONFIDENTIALITY AND PRIVACY NOTICE] Information transmitted by this email is proprietary to Medtronic and is intended for use only by the individual or entity to which it is addressed, and may contain information that is private, privileged, confidential or exempt from disclosure under applicable law. If you are not the intended recipient or it appears that this mail has been forwarded to you without proper authority, you are notified that any use or dissemination of this information in any manner is strictly prohibited. In such cases, please delete this mail from your records. To view this notice in other languages you can either select the following link or manually copy and paste the link into the address bar of a web browser:
<http://emaildisclaimer.medtronic.com>